

ANY FEES DUE ARE CALCULATED AS FOLLOWS:

	<u>NUMBER</u>	<u>FEE</u>
TOTAL Claims Remaining over that Previously Paid:	None	\$0
INDEPENDENT Claims Remaining over that Previously Paid:	None	\$0
	SUM Claim Fees:	\$0
EXTENSION Fees:		\$ 245
OTHER Fees:		\$0
	<u>TOTAL AMOUNT (if any)</u>	\$ 245

☐ Paid by enclosed check.

☐ Paid by enclosed Credit Card Payment Form(s) PTO-2038.

Respectfully submitted,



Date:

7-1-09

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